

# CANDIDATE'S SPECIAL REPORT

(to be filed by a candidate or his principal campaign committee)

This form is filed during the 20 day period immediately preceding an election to report (1) all receipts from a single source in excess of \$1,000 by major office candidates; in excess of \$500 by district office candidates; or, in excess of \$250 by any other office candidates, and/or (2) any payments exceeding \$200 to any person who endorses candidates and who is required to file campaign finance disclosure reports.

All candidates who have had any such transactions within the 20 days immediately preceding an election are required to report any such transaction on this form within 48 hours of the time the transaction occurred.

Mail to: CAMPAIGN FINANCE, Post Office Box 4366, Baton Rouge, LA 70821

1. Qualifying Name and Address of Candidate

CE Smiley JR  
4116 Hwy 505  
Dodson, LA 71422

2. Office Sought (include title of office as well as parish, city, town and/or election district.)

Sheriff  
Winn Parish

OFFICE USE ONLY

10/11

Spec  
10/17

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MISSISSIPPI  
ETHICS ADMINISTRATION  
CAMPAIGN FINANCE  
RECEIVED

3. Name and address of principal campaign committee  
(Applicable only if candidate has a principal campaign committee)

4. Date of Election October 22, 2011

Primary  General  (Check one)

5. a. Name of Person Preparing Report

CE Smiley JR

b. Daytime Telephone 318-628-2321

6. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that are required to be disclosed have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 17 day of October 2011

CE Smiley JR  
Signature of Candidate/Challenger (To be signed by Campaigner only if report by principal campaign committee)

318-628-2321  
Daytime Telephone Number

\_\_\_\_\_  
Signature of Treasurer

\_\_\_\_\_  
Daytime Telephone Number